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00862.021692.

**FEB 26 2004
OFFICIAL**PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

AOJI ISONO ET AL.

Application No.: 09/719,523 ✓

Filed: March 29, 2001

For: METHOD OF CONTROLLING
IMAGE DISPLAY

Examiner: P. Dharja

Group Art Unit: 2673

February 26, 2004

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated November 26, 2003, please amend the above-referenced application as follows. The claims changes are reflected in the listing beginning at page 2. The Remarks begin at page 13.

I hereby certify that this correspondence is being facsimile transmitted to the USPTO, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, at (703) 872-9306 on

February 26, 2004

(Date of Deposit)

LEONARD P. DIANA (Reg. No. 29,296)

(Name of Attorney for Applicant)



Signature

February 26, 2004

Date of Signature

FITZPATRICK, CELLA, HARPER & SCINTO

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TO: Exr. P. Dharia, Group Art Unit: 2673
U.S. Patent and Trademark Office

FROM: Leonard P. Diana, Esq.

RE: U.S. Patent Appln. No. 09/719,523
Atty. Docket No.: 00862.021692.

FAX NO.: 703-872-9306

DATE: February 26, 2004

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In re Application of:

Docket No. 00862.021692.

AOJI ISONO ET AL.

Examiner: P. Dharia

Application No.: 09/719,523

Group Art Unit: 2673

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IMAGE DISPLAY

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Mail Stop Non-Fee Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|----------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 20 | MINUS | ** 51 | = 0 | x \$9 \$18 | \$0 |
| INDEP. CLAIMS | * 14 | MINUS | *** 34 | = 0 | x \$43 \$86 | \$0 |
| Fee for Multiple Dependent claims \$145°/\$290 | | | | | | \$0 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT— | | | | | | \$0 |

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- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants

Registration No. 29,286

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